

☐ EMERGENCY WAIVER REQUEST

Approved by: _____

Date: _____

Accounting/Finance Use Only

FINANCE ID: _____

DLI PERMIT NUMBER: _____

(If amended, indicate the original permit number)

PERMIT APPLICATION AND NOTIFICATION FOR ASBESTOS REMOVAL AND DEMOLITION

Section 1 - Type of Notification (Check the box that indicates the type of notice you are submitting)

☒ Original ☐ Amendment/Revision ☐ Cancellation ☐ Blanket ☐ Phased

Section 2 - Type of Operation (Check the box that indicates the type operation you will be performing)

☐ Asbestos Removal ☐ Emergency Asbestos Removal ☒ Asbestos Removal & Demolition ☐ Demolition ☐ Encapsulation

Section 3 - Facility Owner Information

Name: **Eagle Commercial Construction, LLC**

Address: **2250 Old Brick Road Suite 220**

City: **Glen Allen**

State: **Virginia**

Zip: **23060**

Contact: **Collin Gooch**

Telephone #: **804 741 4663**

Section 4 - Asbestos Removal Contractor Information (complete ALL of Section 4, if this is a Removal/Abatement Operation)

Name: **East Coast Abatement Co., Inc.**

License #: **3306000042**

Federal Employer ID #: **54-1411104**

Address: **176 Windchaser Way**

City: **Moyock**

State: **North Carolina**

Zip: **27958**

Contact: **Diane Drennan**

Telephone #: **252 232 3258**

Section 5 - Demolition Contractor Information (complete ALL of Section 5, if this is a Demolition Operation)

Name: **East Coast Abatement Co., Inc.**

Address: **176 Windchaser Way**

City: **Moyock**

State: **North Carolina**

Zip: **27958**

Contact: **Diane Drennan**

Telephone #: **252 232 3258**

Section 6 - Facility Information

Building Name: _____

Address: **34 Military Residential Structures located at Fort Lee-Please see attached drawing**

City: **Prince George County**

State: **VA**

Zip: **23801**

Site Location:
(crawl space, room#, etc)

Building Size:

of Floors:

Age in Years:

Present Use:

☐ Bridge ☐ Military/ Federal ☐ School/College
☐ Commercial ☐ Office ☐ Ship/Maritime
☐ Church/Place of Worship ☐ Public Building ☒ Vacant
☐ Industrial/Manufacturing ☐ Residential ☐ Other: Click here.

Prior Use:

☐ Bridge ☒ Military/ Federal ☐ School/College
☐ Commercial ☐ Office ☐ Ship/Maritime
☐ Church/Place of Worship ☐ Public Building ☐ Vacant
☐ Industrial/Manufacturing ☐ Residential ☐ Other: Click here.

Section 7 - Work Schedules

Check if this section is being revised from a previous submittal ☐

Removal/Abatement (Submit notification 20 calendar days prior to start)

Start: **05/15/2018** Finish: **10/01/2018**

Demolition (Submit notification 10 working days prior to start)

Start: **05/09/2018** Finish: **10/01/2018**

Days of Operation: ☒ Mon.-Fri. ☒ Sat.- Sun.

Other: ☐ Mon ☐ Tues ☐ Wed ☐ Thu ☐ Fri ☐ Sat ☐ Sun

Hours of Operation Start **7:30** AM

Hours of Operation (Finish) **5:00** PM

Comments: **Weekends only if necessary**

IS ASBESTOS PRESENT? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> To be removed prior to demolition				
Section 8 - ACM To Be Removed		Check if this section is being revised from a previous submittal <input type="checkbox"/>		
Indicate the amount of ACM (Asbestos Containing Material) to be removed, encapsulated, enclosed, etc.		Indicate the amount and type (floor tile, roofing, etc.) of non-friable Category I and/or Category II ACM that will not be removed prior to demolition. (indicate whether in ft, sq ft, or cu ft.)		
Description	Amount	Description	Amount	Units
Pipe (linear feet)	3,600 LF Total-Please see attached table			
Surface Area (square feet)		Category I		
Facility Component (cubic feet)		Category II		
Section 9 - Work Procedures		Check if this section is being revised from a previous submittal <input type="checkbox"/>		
Procedure, including analytical method, if appropriate, used to detect the presence of asbestos: <input checked="" type="checkbox"/> PLM <input type="checkbox"/> TEM <input type="checkbox"/> Presumed ACM				
Inspector: Kyle Frederick Blandford License#: 3303002324				
Asbestos Removal or Demolition Work Practices to be Used (Check all that apply) :				
Asbestos Removal		Demolition		
<input checked="" type="checkbox"/> Containment	<input checked="" type="checkbox"/> Remove Intact	<input type="checkbox"/> Bulldozer/Loader	<input type="checkbox"/> Wrecking Ball	
<input checked="" type="checkbox"/> Wet Methods	<input type="checkbox"/> Rotating Blade Roof Cutter	<input type="checkbox"/> Hand/Manual Methods	<input type="checkbox"/> Implode/Explode	
<input checked="" type="checkbox"/> Negative Pressure	<input type="checkbox"/> Mechanical Chipping	<input type="checkbox"/> Live Burn Training		
<input checked="" type="checkbox"/> Glove Bag	<input type="checkbox"/> Component Removal	<input checked="" type="checkbox"/> Other		
<input type="checkbox"/> Other - Description of work practices and engineering controls to be used to prevent emissions of asbestos if procedures other than approved methods will be used:				
Description of procedures to be followed in the event that unexpected asbestos is found or previously nonfriable asbestos material becomes crumbled, pulverized, or reduced to powder:				
Section 10 - Emergency Waiver Request				
Check the Emergency Waiver Request box on page 1 and attach a letter from the facility owner explaining the nature of the emergency.				
Date and Hour of Emergency: _____ Time: _____				
Description of Sudden, unexpected event: _____				
Explanation of how the event caused unsafe conditions or would cause equipment damage: _____				
Section 11 - Demolition Ordered by A Government Agency				
Name:		Title:		
Authority:				
Date Ordered:		Date Demolition Ordered to Begin:		
Section 12 -Transporters and Waste Disposal Site				
Check if this section is being revised from a previous submittal <input type="checkbox"/>				
Transporter #1: East Coast Abatement Co., Inc.				
Address: 176 Windchaser Way				
City: Moyock	State: North Carolina	Zip: 27958		
Contact: Diane Drennan	Telephone: 252 232 3258			
Transporter #2:				
Address:				
City:	State: ----	Zip:		
Contact:	Telephone:			
Waste Disposal Site: East End Landfill/Amelia Landfill				
Address: 1820 Darbytown Road/20221 Maplewood Road				
City: Richmond/Jetersville	State: Virginia	Zip: 23231/23083		
Contact:	Telephone:	Landfill permit#: 524/540		

Section 13 - Fees

The asbestos project permit fee, when applicable, **MUST** be submitted with the completed project notification form. The fee shall be in accordance with the following schedule unless a blanket notification (as described below) is granted. **If the amount of the asbestos is reported in both linear feet and square feet the amounts will be added and treated as if the total were all in square feet.**

The asbestos project permit fee may be paid by check, money order, or credit card (**VISA and MASTERCARD** only). Make checks payable to the **TREASURER OF VIRGINIA**. If payment is made by credit card, complete the Credit Card Authorization Form and submit with the application.

☐ \$50 - 10 linear feet or 10 square feet up to and including 260 linear feet or 160 square feet

☐ \$160 - 261 linear feet or 161 square feet up to and including 2600 linear feet 1600 square feet

☐ \$470 - 2601 linear feet or 1601 square feet or more.

☐ \$15 - amended notification

☐ Blanket notification - 0.5% of the contract price or \$470 whichever is greater. A blanket notification, valid for a period of one year, may be granted to a contractor who enters into a contract for asbestos removal or encapsulation on a specific site which is expected to last one year. Include of copy of the contract with the notification. Contract price \$ Click here. X .005 (.5%) = \$ Click here.

☐ \$0 - Residential buildings with four or fewer units and are currently in use or intended for use only for residential purposes are exempt from asbestos project permit fees.

☒ \$0 - An asbestos project permit fee is not required for asbestos removal at Federal Government properties, military installations, ships, maritime and demolition operations.

Enter the total fee due for the project: \$ **0.00**

Section 14 - Certification

Check if this section is being revised from a previous submittal ☐

I certify that an individual trained in the provisions of the NESHAP regulations will be on-site during the demolition or renovation and evidence that the required training has been accomplished by this person will be available at the project site for inspection. (40 CFR Part 61, Subpart M, required after November 20, 1991)

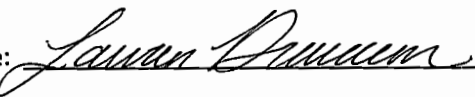
Supervisor: **TBD**
Project Monitor: **TBD**
Project Designer: **TBD**
Laboratory:

License #:
License #:
License #:
License #:

I certify that the information submitted is accurate to the best of my knowledge and that accredited persons are being used on this project.

Name: **Lauren Drennan**

Title: **Project Management Assistant**

Signature: 

Date: **04/25/2018**

Please make sure that all required fields have been completed. Incomplete notifications will not be processed.

Section 15 - Submission Address notifications as described below:

Original notifications must be sent by FAX, certified mail, or hand delivered to the department at the address below.

DEPARTMENT OF LABOR AND INDUSTRY
Attention: Accounting/Finance
Main Street Centre
600 East Main Street, Suite 207
RICHMOND, VA. 23219
FAX (804) 371-7634

The US EPA must also be notified for demolition operations and renovation operations when the amount of RACM disturbed is at least 160 sq. ft./260 in. ft/35 cu. ft. This form may be used to fulfill this requirement. Notifications required by the US EPA must be mailed to the address below:

ASBESTOS COORDINATOR
USEPA
REGION III
MAIL CODE 3LC62
1650 ARCH STREET
PHILADELPHIA, PA 19103-2029

For additional information concerning the completion of this form, please contact the Virginia Department of Labor and Industry Lead and Asbestos Program at (804) 786-9865 or visit our web site at http://www.doli.virginia.gov/leadasbestos/leadasbestos_intro.html



Asbestos Detections/Assumptions

Unit #	Material	Quantity
1	Pipe Insulation	+/- 200 LF
2	Pipe Insulation	+/- 200 LF
3	Pipe Insulation	+/- 100 LF
4	Pipe Insulation	+/- 100 LF
5	Pipe Insulation	+/- 100 LF
6	Pipe Insulation	+/- 100 LF
7	Pipe Insulation	+/- 100 LF
8	Pipe Insulation	+/- 100 LF
9	Pipe Insulation	+/- 100 LF
10	Pipe Insulation	+/- 100 LF
11	Pipe Insulation	+/- 100 LF
12	Pipe Insulation	+/- 100 LF
13	Pipe Insulation	+/- 100 LF
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26	Pipe Insulation	+/- 100 LF



60	Pipe Insulation	+/- 100 LF
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69	Pipe Insulation	+/- 100 LF
70	Pipe Insulation	+/- 100 LF
71	Pipe Insulation	+/- 100 LF
72	Pipe Insulation	+/- 100 LF
73	Pipe Insulation	+/- 100 LF



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East Coast Abatement Co., Inc.
176 Windchaser Way
Moyock, NC 27958

RALEIGH
NC 275
28 APR '18
PM 3 L

\$0.47⁹
US POSTAGE
FIRST-CLASS

071V01184321
27958
000001124



Asbestos Coordinator
USEPA
Region III
Mail Code 3LC62
1650 Arch St.
Philadelphia, PA 19103-2029

19103-2029



